(December 2017 Department of the Treasury

Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

OMB No. 1545-0123

Internal Revenue Service Reporting Issuer Part I 2 Issuer's employer identification number (EIN) Issuer's name GCM GROSVENOR INC 85-2226287 3 Name of contact for additional information Telephone No. of contact 5 Email address of contact **INVESTOR RELATIONS** 312-506-6500 INQUIRIES@GCMLP.COM 6 Number and street (or P.O. box if mail is not delivered to street address) of contact 7 City, town, or post office, state, and ZIP code of contact 900 NORTH MICHIGAN AVENUE, SUITE 1100 CHICAGO, IL 60611-6558 8 Date of action 9 Classification and description CLASS A COMMON STOCK, \$0.0001 PAR VALUE PER SHARE March 15, 2022 10 CUSIP number 11 Serial number(s) 12 Ticker symbol 13 Account number(s) GCMG 36831E108 Organizational Action Attach additional statements if needed. See back of form for additional questions. Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► Distribution to shareholders of record on March 15, 2022. Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per 15 share or as a percentage of old basis ► Distribution was \$0.10 per share, of which 56.0% was a return of capital. Investors should reduce their basis in each share by \$0.0560 per share. Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► Calculation based upon current and accumulated earnings and profits as of tax year ending December 31, 2022.

Pa	rt II	Organizational Action (continu	ed)		· · · · · · · · · · · · · · · · · · ·
17	List th		tion(s) and subsection(s) upon which the tax t	reatment is base	d ► Section 301(c), Section 316
18	Can a	ny resulting loss be recognized? ► N/A			
19	Provid	e any other information necessary to im	plement the adjustment, such as the reportab	le tax year ▶ 202	22
			examined this return, including accompanying sche		
Sign	n	099.2			
Her	e sig	ignature ►		Date ► 1/2	8/2023
		t your name ► JOHN EVANS Print/Type preparer's name	Preparer's signature	Title ► MANA	GING DIRECTOR
Pai			Water A Signature	//21/2023	Check if self-employed P01610397
	pare		,	1 1 1 2 2 2	Firm's EIN ▶ 34-6565596
Use Only		Firm's address ► ONE MANHATTAN			Phone no. 212-773-3000

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054